#### **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

### **DOCUMENT # L03000056844**

JF MEYERS, GENERAL CONTRACTOR LLC



Principal Place of Business

325 NOGALES AVE NE PALM BAY, FL 32907-1910 2350 Mailing Address

325 NOGALES AVE NE

PALM BAY, FL 32907-1919 2350

# **FILED** Jan 15, 2008 8:00 am Secretary of State

01-15-2008 90016 020 \*\*\*138.75

40004207



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MEYERS, J.F.

the obligations of registered agent.

231 BRESCIAST. NE 325 NOGALGS AVENUE, NE PALM BAY, FL 32907-1910- 2350

## DO NOT WRITE IN THIS SPACE

SIGNATURE_		and the same of th	1-08-08	
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE After May	NOWII FEE IS \$138.75 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	MEYERS, JF			
STREET ADDRESS	325 NOGALES AVE NE			
CITY-ST-ZIP	PALM BAY, FL 32907 <del>4916</del> 2350			
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information				

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:	
CICITAL CIVE.	_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-8-08

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